

## Overview of the Rural Health Delivery Work Group to The Maryland Medicaid Advisory Committee

July 27, 2017 Ben Steffen

# SB 707 Freestanding Medical Facilities- Certificate of Need, Rates and Definitions

- Legislation established a process for a hospital to convert to an FMF
- Broadened the definition of hospital services to include observation stays and other outpatient services offered at the FMF, as determined by HSCRC in regulations.
- Defined the findings MHCC must reach before issuing the exemption from CON review for a conversion
- Legislative debate highlighted significant public concern about the appropriateness of health system changes in rural communities
- Established a moratorium on hospital conversions in Kent County until July 2020
- Established a Rural Health Delivery Workgroup and submit recommendations in October 2017

### SB 707 – Rural Health Delivery Workgroup

- Membership
  - General Assembly Members
  - Secretary of MDH
  - · CEOs of rural hospitals
  - · Providers, consumers, local government, business, and labor
- Charge
  - · Assess rural health care needs in the five Mid Shore counties
  - · hold public hearings to gain community input regarding the health care needs
  - Identify policy options developed through Workgroup meetings, through public input, and from the study
  - Specifically recommend policies that address:
    - · the health care needs of residents of the five study counties. and
    - · approaches to improve the health care delivery system in the five Mid Shore counties
    - · Recommendations on economic development, health care work force, vulnerable populations, transportation,
- Issue a report by October 1, 2017

#### Rural Health Delivery Study

- Examine challenges to the delivery of health care in the Mid Shore area, including:
  - the limited availability of health care providers and services;
  - · the special needs of vulnerable populations;
  - · transportation barriers; and
  - · the economic impact of the closure, partial closure, or conversion of a health care facility;
- Identify opportunities created by telehealth and the Maryland all—payer model contract for restructuring the delivery of health care services; and
- Develop policy options for addressing the health care needs of residents of, and improving the health care delivery system in, the five study counties

#### **Findings**

- People prefer to access essential care close to where they live.
- People have significant pride in their own communities. "Regional" has negative connotations to some.
- Supply of primary care, behavioral health, and specialty providers is uneven and critically low for some vulnerable populations.
- Health literacy is a major barrier to all, but especially elderly and people with chronic conditions.
- Residents believe that the quality of care they receive is lower than on the Western Shore.
- Disconnect between opinion leaders and consumers on benefits of competition among health systems.
- Access to acute care services is a major concern, but residents in the five jurisdictions have different perceptions of what that means.

#### Overview of Recommendations

- · Rural Community Health Complex Demonstration Project
  - · Provide for primary care services and other services as close to a community as possible
  - · Take advantage of established health care facilities (build on what is in place and breakdown some silos)
  - Establish Patient-Centered Technology Hub
  - · Establish a Rural Health Planning Collaborative to support the development of the complexes
- Supporting Recommendations
  - · Establish a definition of a Special Rural Hospital that would have some additional protections under the All Payer Model
  - Workforce Development -- Create incentives to expand primary care and behavioral health workforce in the community, define role of community health workers
  - · Expand access to behavioral health, substance abuse services, and adult dental health services
- Reduce Transportation Barriers
  - · Expand programs such as the Mobile Integrated Community Health (MICH) program that brings care into the home
  - · Expand use of telemedicine and mHealth
  - · Standardize medical non-emergency transport across Maryland counties.

Learn More: <a href="http://mhcc.maryland.gov/mhcc/pages/home/workgroups/workgroups rural health.aspx">http://mhcc.maryland.gov/mhcc/pages/home/workgroups/workgroups rural health.aspx</a>

Contact: Erin.Dorrien@Maryland.gov; Kathleen.Ruben@Maryland.gov